Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name TAQUERIA DE LA ROSA LLC						Est	Telephone Number 831-596-6320	Date of Inspection	ID#	
Address 3417 GRANTLINE RD SUITE 113, NEW ALBANY IN 47						Own		09/28/2021		
Owner ELIGIO DOMINGUEZ							PurposeRoutine	Follow Up	Released 09/28/2021	
Owner's Address 6207 KAMER CT NEW ALBANY, IN 47150							Follow-up Complaint			
Person in Charge ELIGIO DOMINGUEZ							X Pre-Operational			
Responsible Person's Email ELIGIODOMINGUEZ29@YAHOO.COM							TemporaryHACCP	Menu Type 1 2 3 _X	Menu Type 1 2 3 _X 4 5	
Certified Food Handler ELIGIO DOMINQUEZ							Other (list)			
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"										
ection# C NC R Narrative							To Be Corrected			
351 347 324 399 431		X X X		Observed no har Observed floor of drained. Replace to make permnar Observed absorb	plug. If this does no	nand wash drain plu ot correct arewash a	ning sink. ng when3-comp sink is the issue a plumber will have area. Seal or relace.	1 week before of Before of before of before of	pening	
Summary of Vio	olations	C	- -	0 NC	5 R 0					
Received by (name and title printed):							Inspected by (name and title printed): Thomas Snider EHS			
Received by (signature):]	Inspected by (signature):			
cc:					cc:			cc:		